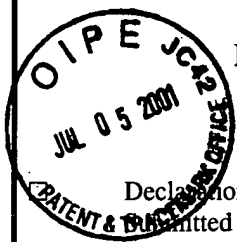


**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION**
(37 CFR 1.63)



Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16(e))
required)

Attorney Docket Number 04645.0862

First Named Inventor Frysz et al.

COMPLETE IF KNOWN

Application Number 09/847,678

Filing Date 05/02/2001

Group Art Unit 1745

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Mismatched Compression Glass-To-Metal Seal

the specification of which
☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 05/02/2001 as United States Application Number or PCT International
Application Number 09/847,678 and was amended on (MM/DD/YYYY) () (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application (Numbers)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/202,015	05/04/2000	

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number
OR



Place Customer
Number Bar Code
Label Here

☒ Registered practitioner's name/registration number listed below

Name	Registration Number	Name	Registration Number
Michael F. Scalise	34,920	R. Kent Roberts	40,786
Ranjana Kadle	40,041	John M. Del Vecchio	42,475
Martin G. Linihan	24,926	Patrick J. Tracy	42,187
Kevin D. McCarthy	35,278	Daniel C. Oliverio	33,435
David L. Principe	39,336	Edwin T. Bean, Jr.	16,639

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto

Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☒ Correspondence address below

Name	MICHAEL F. SCALISE				
Address	Hodgson Russ LLP				
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18-U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Christine A.	Frysz

Inventor's Signature					Date	6/11/01	
Residence: City	New Milford	State	Connecticut	Country	USA	Citizenship	USA
Post Office Address	39 Little Bear Hill Road						
Post Office Address							
City	New Milford	State	Connecticut	ZIP	06776	Country	USA

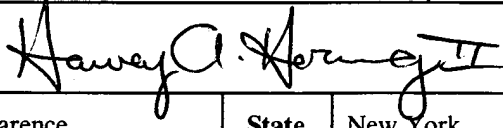
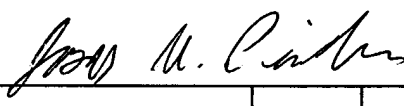
☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 3 of 3

Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
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Harvey A.					Hornung II				
Inventor's Signature					5-3-01		Date		
Residence: City	Clarence	State	New York	Country	USA	Citizenship	USA		
Post Office Address	4470 Shimerville Road								
Post Office Address									
City	Clarence	State	New York	ZIP	14731	Country	USA		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])					Family Name or Surname				
Joseph M.					Prinzbach				
Inventor's Signature					Date		03 May 01		
Residence: City	North Tonawanda	State	New York	Country	USA	Citizenship	USA		
Post Office Address	278 Shartle Place								
Post Office Address									
City	North Tonawanda	State	New York	ZIP	14120	Country	USA		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])					Family Name or Surname				
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		ZIP		Country			

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